

BULLETIN

OF THE

Harvard Medical School Alumni Association



THE 13th INTERNATIONAL
PHYSIOLOGICAL CONGRESS

ADDITIONS TO THE
MEDICAL SCHOOL DORMITORY

NEW HOSPITAL UNIT AT
THE MASSACHUSETTS GENERAL

November, 1929



X-Ray photo of hand showing severe rickets

Successful Treatment of Rickets~

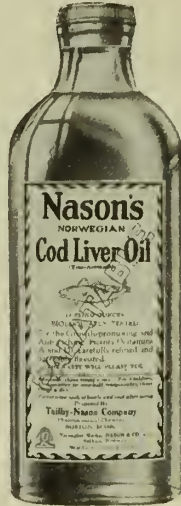
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X-Ray photo of same hand—one year later showing rickets healed

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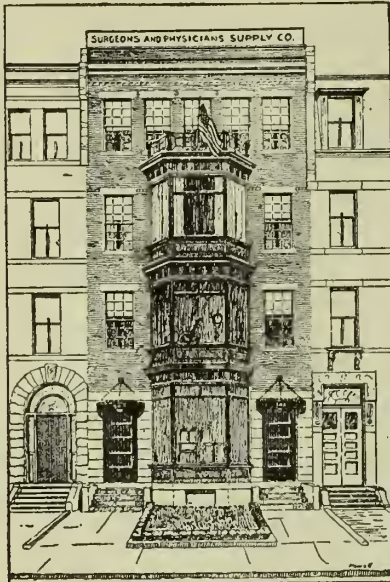


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The Harvard Medical Alumni Association, Past, Future

The Harvard Medical Alumni Association was organized in 1891 under the leadership of James R. Chadwick, M.D. 1871, the object being "to advance the cause of medical education, to promote the interests and increase the usefulness of the Harvard Medical School, and to promote acquaintance and good-fellowship among the members of the Association." How have these objects been accomplished in the past and what can be done to carry them out in the future?

Before the War, membership in the Association was limited to those who could pay \$5 a year toward its expenses. In return for this, members received once in three years a catalogue containing their collected names and addresses. Later the money from dues supported two alumni assistants on the teaching staff of the Medical School. In 1916 the number of these as-

sistants was increased to five, and the practice of requesting voluntary contributions to defray the increase in expense was begun. Thereafter, a campaign for funds was undertaken each year, as a result of which about \$3,000 was collected from a small nucleus of those men in and near Boston who had a greater interest in the Medical School and had the means to contribute toward it. In the meantime the Alumni Association attempted to inform the graduates of what the School was doing and to make the graduates "support" the School.

This worthy object, however, was fulfilled only by the various meetings which were held. Each year at the annual meeting the Dean would describe to the small group assembled the important feature of the past year's work. This report of progress, however, was not published, and the men from outlying districts remained as

much in the dark as ever. But bits of news did come to them. The appointment of new professors was satisfactory to some, distasteful to others. The method of teaching was a constant source of discussion. Various problems—the laboratory *versus* the clinic; scientists *versus* doctors; the increasing reliance on complicated technical procedures and the decreasing use of the five senses—were constant sources of worry and irritation to those men who lived apart from the School and whose information about it came through underground channels and consisted of only half the story. The accomplishments of the Alumni Association were not very great.

In June, 1922, there came a change. Every graduate became *ipso facto* a member of the Medical Alumni Association. A week or two after his election, Dr. Elliott P. Joslin, the new president, was asking "What does the Harvard Medical School need most?" A dormitory was suggested, but only as a remote, rather intangible project, which might perhaps come some day, but was hardly to be expected in the near future. The project, however, appealed at once to Dr. Joslin, and, with characteristic energy and tireless effort, he began his campaign.

Representative graduates in Boston and in New England were approached. Every one of them was enthusiastic, even if somewhat skeptical, of the possibilities. These men were organized into a committee and from them a small executive committee was chosen. The work was organized, the country was divided into districts so that each and every Medical School graduate could be approached. The result was that in the spring of 1925, \$113,000 had been contributed by 1,485 doctors, who comprised close to fifty per cent. of the total number.

In the meantime this support of the project by the doctors was so impressive and

the project itself was so appealing, that Mr. Harold S. Vanderbilt was glad to give the rest of the Dormitory.

The building of the Dormitory overshadows every other accomplishment of the Harvard Medical Alumni Association. It has been of immense importance in several directions. Not only has the Dormitory provided the Harvard Medical School with material facilities which were badly needed, but our Dormitory built solely for medical students has started a new epoch in medical education.

The success of the Dormitory, apparent to all who cross its threshold, is attested by the fact that now, in the third year, plans for enlargement are completed. The great generosity of Mr. Vanderbilt has provided more money, and ground has already been broken.

But the Dormitory has had other effects. Nearly fifty per cent. of the graduates have contributed to it. This figure is in contrast to the small number—fifteen per cent—who formerly took active interest in the Medical Alumni Association and contributed to its older activities. This increase of interest is impressive, and there is every indication that it is real, because since the Dormitory was built voluntary contributions to the Association have come each year in increasing numbers. The old barrier between those men in Boston who were in active contact with the Medical School and those other men at a distance and out of contact with it is breaking down. The latter do not feel any longer that they are cut off, that their interest in the School is superfluous, and that their suggestions for its improvement are not wanted. Quite on the contrary, an honest effort is being made to draw these men together.

The Harvard Medical School has grown to an incredible extent. The annual expenditures, which in 1910 amounted to about \$250,000 and in 1920 had risen to

about \$575,000, are now close to \$1,000,000 a year. The number of men who held Faculty appointments in the School in 1910 was 60. In 1920 it was 88. Today the number is 424. The students numbered in each class about 75 in 1910; they increased to 100 in 1920, and now the number must be limited to 125 in the first and second years and 135 in the third and fourth years. Moreover, applications for admission from qualified candidates numbered this year 644. The students accepted are picked men, carefully selected according to their capacity to absorb the extraordinary training that can be offered them by Harvard today.

Dean Edsall's last report to the President describes in some detail the changes in the School and is well worth reading. It speaks of the new "School of Public Health"—its close relation to the Medical School, which is not only physical and financial but adds greatly to the opportunities for teaching and research in both the institutions. It speaks of changes in many departments of the School—of the new "Department of Physical Chemistry," of the development in Neurology and Psychiatry, and of the new opportunities in Ophthalmology. More important is the co-operation between the School and the Boston hospitals, which is made even closer by the modern laboratories recently developed in the Thorndike Memorial Building at the City Hospital, and in the new clinical laboratories at the Massachusetts General Hospital and at the Children's Hospital.

The report mentions the Medical School Library, that its circulation has increased from 4,000 to 21,000, and its attendance from 13,000 to 34,000 in the past ten years.

These increased facilities have brought results. The discovery of a treatment for

Pernicious Anaemia, advances in Physiology which have placed this department in the front rank, and advances in Immunology and Bacteriology which have influenced the whole School, may be mentioned. In connection with research work supported by the DeLamar Fund alone, 641 publications have appeared.

The general examination of a very broad and comprehensive character given at the end of the fourth year has greatly modified the character of the teaching and the attitude of the students, who are taught principles rather than cold facts. Surely the quality of the growth of the Medical School has been maintained with the quantity. No wonder that two-thirds of the students come from further away than New England. Our School has come to have an influence that is both national and international. The members of the Alumni Association can have a just pride in their membership. Dean Edsall, commenting on the change from the former status of apprehension and difficulties to the present status of real progress, says "it is never time for complacency or for rest from progress . . . unremitting care . . . in the choice of personnel . . . and constant effort to take advantage of the new opportunities for service . . . are necessary There are many things still in unsatisfactory state."

We, as graduates, can help by increasing our contact with the School. In 1926 the HARVARD MEDICAL BULLETIN was established under the leadership of Dr. Truesdale. This publication has increased the contact between graduates and the School, but it can be extended and improved. Elsewhere in this number the immediate plans are presented. Suggestions for the improvement of future numbers will be gratefully received.

The 13th International Physiological Congress

By JOHN F. FULTON, '21, M.D. '27, FELLOW OF MAGDALEN COLLEGE.

THE University was the host of the International Physiological Congress, which met at the Harvard Medical School during the week of August 19-24. The occasion was unique, as it was the first time that this body had held a meeting in America, and it was therefore particularly fitting that Harvard should have been selected for the gathering, since its Medical School can boast of the first laboratory in America for the teaching of physiology. Only 58 years have elapsed since Henry Pickering Bowditch returned from Leipzig to set up his laboratory at the Medical

School, and, during that period, the science which he cultivated has given to the world such discoveries as those of adrenalin, thyroxin, insulin, the use of X-rays for the study of gastro-intestinal functions and disorders, the integrative processes of the nervous system, and many other contributions which have advanced the science of medicine, and notably alleviated human suffering.

The growth of physiology during the last forty years is well illustrated by the attendance at the previous international congresses.

<i>Date</i>	<i>Place</i>	<i>President</i>	<i>Attendance</i>
1889	Basel	J. Holmgren	129
1892	Liège	Léon Fredericq	102
1895	Berne	Hugo Kroenecker	146
1898	Cambridge	Sir Michael Foster	166
1901	Turin	Angelo Mosso	214
1904	Brussels	Paul Heger	264
1907	Heidelberg	Albrecht Kossel	322
1910	Vienna	Sigmund Exner	365
1913	Groningen	Hartog J. Hamburger	432
1920	Paris	Charles Richet	200
1923	Edinburgh	Sir Edward Sharpey Schafer	516
1926	Stockholm	Johan E. Johansson	651
1929	Boston	William H. Howell	1,654

At the first congress, held at Basel in 1889, the attendance was 129, only ten or twelve of whom had gone from America. In 1926, when it was proposed that the next meeting be held in America, it was feared that the expense of the journey would prevent foreign members from attending and that not more than 50 could be expected. The immediate response to the invitation issued a year ago to foreign members showed that at least 200 would attend, and the surprise was great when, a few weeks before the meeting, more than 600 foreign members had signified their intention to come. The total registration for the meeting was 1,654, or nearly three times that of any previous congress. All of the foreign members together with their families, and many of the American mem-

bers, were, through the generosity of the University, housed in the Freshman Dormitories and in Vanderbilt Hall, except for a few who were taken care of in private houses. The elaborate details of organization were very effectively managed by the secretaries of the Congress, Drs. Edwin Cohn and Alfred Redfield, with Professor Walter B. Cannon as chairman.

Professor William H. Howell of Johns Hopkins was the president of the Congress and gave the opening address at Sanders Theatre, on Monday, August 19. On this occasion the Federal Government was represented by the Surgeon-General, the Commonwealth by Lieut. Gov. Youngman, and President Lowell responded very happily for the University. Professor Krogh of Copenhagen delivered the oration of the



Professor Ivan Petrovitch Pavlov and Dr. Walter B. Cannon.

Photograph taken at the Congress a few days before the former's eightieth birthday.

evening, on "The Progress of Physiology".

The communications began on Tuesday and were held in six amphitheatres in, and in the neighborhood of, the Harvard Medical School. The papers were so numerous that for four days six sessions had to proceed simultaneously, each communication in any session being limited to ten minutes. The most notable personality of the huge assembly was, by common consent, Professor Ivan Pavlov, the distinguished physiologist of Leningrad, who, on September 14 of this year, celebrated his 80th birthday. After a series of brilliant contributions, made early in life, on the physiology of the stomach, he has devoted himself unremittingly during the last thirty years to the study of conditioned reflexes. For the first time the obscure psychic processes of the higher centers of the brain have been

placed upon an objective basis of study. His experiments are still actively in progress, and he continues them and describes them with that picturesque enthusiasm which, even forty years ago, had already endeared him to the hearts of physiologists throughout the world. As he preferred to speak in Russian, one of his former pupils, Professor G. von Anrep, served as interpreter on the two occasions on which he spoke. One of those who attended the first meeting has described the scene in the following graphic terms:

"Before a small and select group in one of the Cannon's side rooms, we had Pavlov serving up his latest ideas of inhibition in relation to neuroses, hot from the griddle. Vivid, alert, gesticulating, the old man poured out his Russian phrases, like a mitrailleuse never missing fire, directing

his attention meanwhile chiefly to Anrep, who sat calmly alongside smoking innumerable cigarettes. Pavlov would suddenly stop and point menacingly to Anrep who possibly would ask him a question or two to make sure of his ground—indeed even interrupt him. Pavlov, moving his watch and chain along about six inches farther on the table in front of him, would slump down in his chair, shifting his ischial tuberosities to one side or the other—whether because the chair was hard or because this was one of his reflexes, I am not sure. Anrep would then begin, always composedly, and give a most brilliant and concise presentation in English of what had gone before. Pavlov then picked up the thread again and continued. This went on for an hour and, except for the intrusion of a few belated guests who crowded into the room, one could have heard a pin drop."

Pavlov spoke again at a much larger gathering on Friday morning, the 23d, on "Inhibition in the Normal Activity of the Cerebral Hemispheres." As soon as he appeared, the entire audience rose spontaneously to its feet amidst thundering applause.

Much new and important work was reported at the various sessions. There was nothing, perhaps, as epoch-making as the discovery of insulin, though Koehler was able to announce that he had obtained an extract from the adrenal cortex which relieves the more distressing symptoms of the disease known as myaesthesia gravis. Drs. Cushing and Teel reported their successful separation of the growth-promoting substance in the anterior lobe of the pituitary from the hormone which causes sexual maturity. Professor Hess, of Zurich, described a center at the base of the brain, which, when stimulated electrically, immediately induces sleep. For a number of years it had been suspected that a center governing sleep existed in this region, and the final proof not only is welcome, but marks a great step forward in the knowledge of the functions of the nervous sys-

tem. Drs. Edwin Cohn, McMeekin, and Minot brought forward further observations upon the extract of liver effective in treatment of pernicious anaemia. Though the chemical nature of this remarkable substance is not yet definitely known, it has been so far analysed that its chemical behavior is now clearly understood and it will probably be only a short time before its structural formula is known. Professor McSwiney and Dr. Robson described their important experiments upon the stimulation of the smooth muscle of the stomach and intestines by means of their various nerves in isolated preparations, a new and striking achievement. Dr. Cannon exhibited his series of animals from which the sympathetic nervous system had been completely removed, a surgical feat which has shed important light upon the functions of this system and its relation to emotions. Professors Gasser and Erlanger brought from St. Louis their cathode ray oscillograph, which enables one to detect, individually and collectively, the large variety of functionally different nerve action currents, which pass in any mixed nerve trunk. There were also a multitude of other demonstrations.

One of the pleasantest features of the meeting was the concert at the Medical School on Wednesday evening, the 21st. It was a glorious, cool, moonlit night, and the Boston Symphony Orchestra played from a large platform erected for the occasion on the steps leading to the central building of the Medical School. The program was a very happy one, and, with illuminated marble buildings as a background and a gathering of nearly 2,000 people in the central court, the scene was striking and memorable.

The official dinner was held in Memorial Hall, Cambridge, on Thursday evening the 22d. It was served by the Copley-Plaza Hotel and 1,100 attended in the hall. The excess were dealt with in the Freshman Dormitories, whose dining halls were connected with Memorial Hall by loud speakers. Dr. Krumbhaar, the president of the



Professor A. V. Hill of University College, London, (left) and Professor and Madame Louis Lapique of the Sorbonne Discuss Chronaxie.

American Federation of Biological Societies, introduced Dr. Cannon, who presided. Professor Fil. Bottazzi of Naples spoke for Italy; he alluded to the fact that physiology had its birth along the sunny shores of the Mediterranean and recalled the names of certain Italian physiological worthies of the past. Professor A. V. Hill responded for England and, as usual, in a most happy vein. He had found in the records of his *alma mater*, Trinity College, Cambridge, a notice of a meeting held on August 26, 1629, at which John Winthrop, a fellow of the College, had ap-

plied for leave to sail to America. The fact that this had occurred 300 years previously almost to the day was a striking coincidence, and Hill made it the chief theme of his address. Professor Otto Frank represented Germany at the dinner, and Gley spoke for France. After the dinner the gathering adjourned to the College Yard which, in the moonlight, with orchestra, dancing, and Japanese lanterns, effectively counteracted the regrettable circumstance at the dinner of having to drink a toast in water "to international good feeling."

The Congress was terminated on Friday

afternoon by a series of addresses at a general meeting in Sanders Theatre. The venerable Léon Fredericq of the University of Liège read an interesting historical paper describing the early physiological congresses. Dr. Johnsson, the president of the Stockholm Congress in 1926, followed Professor Fredericq and made the interesting remark: "It will be more and more evident that it is the actual searching for what we call truth and not its presumed possession which creates the cultured man. A general acceptance of this point of view might form the premise for that 'peace on earth' of which man has dreamt through all ages." After this, various invitations were read from the Governments of Japan, Russia, and Italy, and it was decided that

the next meeting should be in Italy in August, 1932.

Such international meetings have a most salutary influence upon the growth of science. The interchange of ideas which inevitably takes place has a far-reaching effect on the progress of knowledge and, in addition to this, it serves to break down international barriers of politics and language. The warm enthusiasm, with which the foreign delegates have since referred to the Congress, was indeed gratifying to all those who were on the local committee, and they in turn feel a particular debt of thanks towards the University, whose generous response contributed so notably to the marked success of this important international gathering.

The Additions to the Dormitory

BY DR. DAVID L. EDSALL, DEAN OF THE MEDICAL SCHOOL.

THE first year that the Dormitory was in use, it was rather disquieting that the applications for rooms were so low as to be far from enough to fill the Dormitory, and altogether too few to provide an income sufficient to meet the costs of running the Dormitory—that is, whereas there was space for 252 students, there were, at the time that the drawing of rooms was made, less than 170 applications. Later in the year the number increased very considerably, but there still remained throughout the year a considerable number of the rooms not in use.

Aside from the dining hall, then, there was during that year an actual loss on the running of the Dormitory—that is, the rental paid for rooms did not meet the actual costs. This, as was thought at the time, proved to be due to the newness and uncertainty of the attractiveness of the Dormitory in the minds of the students when it was still wholly uncompleted and there was no experience of living there. Last year, after one year's use of it, the applications were about 35 more than could

be cared for with the original arrangements. Ten of these were cared for by putting more men into certain of the suites than had been the original plan, which could be comfortably and effectively done with certain of them by putting in double-decker beds; and this not only took care of ten more men but provided very comfortable conditions for a group of men at a noteworthy decrease in cost to them.

The drawing last spring for the academic year 1929-1930 showed a much greater increase in the excess of applications over the possibility of caring for them. The students applying this year were 32 more than could be cared for even with more in the suites; and there were in addition thirteen of the teaching staff and of graduate students who applied but could not be cared for. There were, besides, a considerable further group who wished to live there but did not formally apply because the waiting-list was so long. Instead of having, as last year, sixteen of the teaching staff and graduate students living there, of the 260 who are now in the Dor-

mitory, there are only three of the teaching staff and no graduate students.

The success of Vanderbilt Hall has been even greater in many ways than it was hoped by everyone would be the case. The provision of comfortable living quarters is very obvious, as is the provision of opportunities for exercise which did not previously exist. The squash courts have been under constant pressure at certain times of day when the students were free, and have been a very great advantage and pleasure to them; and the gymnasium is extensively used both for basketball and for other purposes. All those who were interested in the Dormitory felt that it would also exercise other influences, somewhat more subtle but in their way equally important—namely, that it would greatly benefit the social and intellectual life of the students through providing conditions that made feasible, and actually encouraged, easy and intimate contacts and free discussion between the students themselves, and, to a considerable extent, between the students and the teaching staff.

In that respect, the success has been apparently far greater and more rapid than was at all anticipated by the most hopeful. Within a very few weeks after the Dormitory was completed, the students themselves remarked upon it repeatedly, and it rapidly became a real center of the life of the students, and the common room and the dining hall became actively used in social ways, and in the discussion of their work, their plans, and their ideas. These influences have been increasingly evident to both students and others as in no way less in their importance and the pleasure they give than the other effects of the Dormitory. In the influence upon the future life of the men, the effectiveness and pleasure of their lives, this result is perhaps likely to be the greatest of all. Its effect will be very great upon the whole atmosphere of the School, the loyalty and cohesion of the group, the development of the finer social qualities that are so important in the doctor, and also of the scholarly qualities that

are so desirable a part of any graduate university training.

It became quite evident during the past year that instead of its being several years before more space was needed in the Dormitory, that condition was upon us already. The matter was taken up, therefore, with the architects, and tentative plans were prepared. Two choices were open:

1. To complete the enclosure of the court, leaving a dignified entrance archway.

2. To build above the gymnasium.

Both of these were projected in the original plan as the ultimate development.

The first plan would provide for fifty to sixty more rooms; the second for about eighty-five or ninety. The latter number was more than at the present seemed to be demanded. It did not appear suitable, therefore, to seek for money for more than was needed at present and more than seemed likely to be needed for a number of years. It also seemed psychologically disadvantageous to have prospectively a considerable number of rooms unoccupied for a period of years, it being always better to have some excess of demand than to be unable to rent what is available.

Also, the first plan would be architecturally advantageous; the second plan would, until the first was completed, be architecturally unattractive. Finally, it would take away the squash courts, so that it would require, besides the construction indicated, the excavation for the first plan and the building of squash courts there, or to be without squash courts. The latter was almost unthinkable. To provide the squash courts in that way, in addition to making an unnecessarily large addition, was obviously a distinct extravagance that was not justified, even if the large sum it would require could be secured. The first plan was therefore approved.

In addition to the enclosure of the court and the provision of more rooms, in accordance with the approval of the President, the Administrative Board, and others who have been interested in the Dormitory,

the tentative plans included a Master's House, where the Dean or other member of the Faculty would live. The purpose of this is the same that has long been in effect at Oxford and Cambridge and other places and has been true in a number of universities in this country, and is being employed in the new "Houses", the construction of which is now being begun in Harvard College—that is, it provides an easy and informal and effective way for the person who acts as Master to have intimate and friendly relations with the students, and also to bring them into contact with distinguished visitors and with other members of the Faculty, and in general to carry out all those intimate ways of furthering the intellectual, social, and professional development of the men that come through contacts with their seniors in other ways than in the formal activities of the curriculum.

The plans, as prepared by the architect, call for an expenditure of about \$450,000. When this was discussed with Mr. Vanderbilt, he very generously arranged to assume the whole cost of the new development, so that the Medical School and the students will now be under still greater obligation for his munificence.

The beginning of the work on the new building is being undertaken now, and it is expected that the whole new development will be completed and ready for use with the beginning of the academic year 1930-1931. It will provide for between fifty and sixty further rooms. As a part of the representations made to Mr. Vanderbilt on the basis of which he made his generous new gift, it was planned that aside from the medical students there should be definite provision made for some instructors each year and for some graduate and public health students. The advantage of having some instructors living intimately among the students is quite obvious. They would in no sense be expected to exercise disciplinary relations. On the contrary, the purpose of having them there is more intimate intellectual and social contact with

the students. The reason for the provision for graduate and public health students may not be quite so apparent to the Medical alumni since they may not be familiar with the fact that in recent years the School has attracted each year a very considerable group of exceptionally chosen and able young men from all parts of the world, doing chiefly research work under the large group of distinguished research workers now in the School, and also preparing themselves as a rule for teaching. In the Public Health School also there are each year a considerable group of unusually able and interesting young men, likewise from all parts of the world. A very few of these men have been living in the Dormitory in the past two years; only a few could be cared for. They have been, as is quite natural, a very interesting and stimulating group to the students, and carry with them things from the world at large that are very stimulating and developmental for the students as well as the teaching force to be in contact with. As the request was presented to Mr. Vanderbilt, it included the plan of having twenty-five or thirty instructors, graduate students, and public health students living there regularly, partly for their own advantage but particularly for the advantage that it would bring to the medical students who live there.

It seems altogether probable that with the new development there will still be something of an excess of applications over the provision that can be made for them, though not great for some years to come. It will meet the need to about the extent that seems desirable at present and will make such a situation that in another year very few will have to be disappointed.

It is hoped also that it will accomplish another very desirable purpose. The cost of the original structure as completed two years ago was about \$1,400,000, of which Mr. Vanderbilt gave the very generous amount of \$700,000. At the repeated and urgent request of the Alumni Dormitory Committee, the University put in \$300,-

000, and upon further request added \$75,000—a total of \$375,000. These were University trust funds and, as the Alumni Committee requested, they were put in as an investment, with the need for securing an income on the investment, as is necessary, of course, with trust funds given for University purposes. That made it necessary, however, that in addition to the ordinary running costs of the Dormitory there should be income enough from rentals to provide the interest on \$375,000. The necessary result of that has been that the rentals for the rooms were made somewhat higher than they might have been made otherwise, though in point of fact, since there is no attempt to make a paying income from the Dormitory in any other way, this means a very small return on the total cost of the Dormitory, and it means that the rentals are extremely low for what is provided, as compared with anything that could be secured outside. Nevertheless, it has proved very desirable to have a moderate number of more rooms at the lower rates in order that the students with very limited incomes might in greater numbers be able to live in the Dormitory. The increase now in the number of rooms available, the fact that the cost of the new construction does not involve money upon which income must be obtained, and the further fact that the *per capita* overhead will decrease somewhat with the increase of the total activity, will, it is hoped, make it possible to provide a considerably increased number of rooms at rentals that will be possible for the quite poor students—that is at amounts that provide them with rooms outside, very poor rooms to be sure, but now a limited number feel obliged to take such outside rooms because the number of rooms at those prices in the Dormitory has not been equal to the demand.

There has been since the completion of the Dormitory a room with proper shelving for a small library. The other necessary equipment is available. This it was always intended should be a library of general

literature without any strictly medical matters included, so that there might be opportunity for the students in their spare time to secure easily some increasing familiarity with fine general literature. The room has simply been closed because there was no money for the purchase of books or journals. There has now been given for this purpose one gift of \$2,500 and other gifts that make the total somewhat over \$3,000, so that there is money enough to make a very adequate start toward the provision of the proper reading matter. The library, therefore, is about to be opened, and a part of the purchases of books has been made. It is expected that this room will be filled ultimately with books on romance, poetry, history, biography, philosophy, and other general matters, and it is hoped also that there may be provision made for a small number of current journals and newspapers of the best sort—one or two of each from this country, Great Britain, Germany, France, and perhaps elsewhere. It is hoped also that it may be possible to provide the services of a student or other person for two or three hours a day, or perhaps more, as it will be necessary to have someone keep records of books taken out to keep them from inadvertently disappearing, and in other ways to promote the activities of the library. There is no money at present for anything excepting the original purchase of a moderate number of books. It would be of very great service to the students could a fund providing about \$500 a year be secured for this purpose.

In all ways the Dormitory and the activities associated with it have been a very unusual success, as indicated above, excepting in the one particular that the dining hall has each year lost money. The reason for this is that it is purposed to provide only food of wholesome quality and adequate amount and at as low a price as seems at all reasonable. In order to accomplish this, a considerable clientele is necessary, and there should be served each day approximately 700 to 750 meals, fair-

ly evenly distributed among the three meals. There has been no difficulty about luncheon, and, in fact, there has been rather an overload at luncheon time, but the number served at breakfast and dinner has been too small. A variety of methods of meeting this were considered, and in part were tried. Finally, last spring, with the entire coöperation of the students, it was decided that the most promising way of meeting this difficulty and at the same time of increasing the influence of the dormitory life in a social way and promoting the general solidarity of the whole group of students and instructors and others, was to manage the Dormitory, except for the bedrooms, as a club, with dues. Beginning with the present academic session, therefore, it is being carried on as "The Vanderbilt Club of the Harvard Medical School." Its stated objects are "to increase social and fraternal intercourse among members and alumni of the Harvard Medical School and to promote the welfare of Harvard University." The officers of the Club, besides the president, vice-president, and secretary, are five representatives coming chiefly from among the students, and a treasurer; the treasurer and two representatives to be appointed by the Dean of the Harvard Medical School and preferably to be members of the teaching staff. There is a membership fee of \$10 per year. It is understood that the funds of the Club coming from the membership fees or otherwise shall be deposited with, and handled by, the Comptroller of Harvard University; and the money from dues shall, if necessary, be entirely employed to meet the dining hall deficits, but if not completely used in this way or if the clientele of the dining hall so far improves that there is no deficit, then the very considerable sum of money provided by the dues may be expended upon authorization of the House Committee in such ways as seem to be to the best interests of the Club, as in improving the library facilities or the athletic facilities, in entertainment, in the provision of speakers from nearby or a distance, and in any other ways

to make more effectual and interesting the influence of the Club upon the life of the student-body and to promote the closeness of relation between the student-body, the instructors, and the alumni.

Those who are eligible as members are as follows:

- Any student in the Harvard Medical School.
- Any member of the teaching staff of the Harvard Medical School.
- Any member of the teaching staff of the School of Public Health.
- Any member of the teaching staff of the Harvard Dental School.
- Any member of the teaching staff of the Courses for Graduates.
- Students regularly enrolled in the School of Public Health.
- Students of the Courses for Graduates certified by the Secretary of the Courses for Graduates.
- Graduate students, voluntary workers, and special students on the recommendation of the head of a department of the Medical School, who shall vouch for them.
- All alumni of the Harvard Medical School not covered by previous classification.

All such members shall have not only the privileges of the dining hall but also the privileges of the common room and the library and the general privileges of the Club in other ways. It has been voted by the Dormitory Committee, however, that the athletic facilities of Vanderbilt Hall are not included in the membership for any others than students and the Medical School teaching force. Mr. Vanderbilt's gift of the athletic facilities was a special gift intended for those just mentioned and not for others who have opportunities to use such facilities elsewhere. The privileges of the use of the athletic facilities may be extended under particular conditions by the committee to other persons, but each case must be acted upon specifically and based upon a definite reason. The students should have the primary rights to the athletic facilities and particularly to the squash courts, which are frequently under pressure. Even members of the teaching force who have access to other courts are requested not to use the Vanderbilt Hall courts freely at such times as there is pres-

sure upon them by the students' use of them, and it may be necessary to restrict their use entirely to students.

Aside from the above mentioned regular membership, there is provided a temporary membership for graduate students who are here for a short period; and guest privileges for luncheon are provided for secretaries and women technicians engaged in the work of the School and also for women graduate students, voluntary workers, special students, and women students in the Courses for Graduates.

Besides providing for actual membership in the Club, which would cover those nearby alumni who would make frequent use of the dining hall or other facilities, it is understood, as heretofore, that all alumni of the Harvard Medical School not covered by previous classifications have guest privileges in the dining hall, so that when they have occasion to use the dining hall at intervals they will be entirely free as before to do so. Like members, they will also be allowed to bring guests to the dining hall.

The dining hall privileges and the other facilities of the Dormitory are not open to others than those mentioned above who

have become members or who have been given guest privileges; excepting, of course, that the rooms are rented to any students whether members or not, and the athletic facilities are available to students who may not take out membership; but non-members who use the athletic facilities are required to pay a fee of \$5 a year for the use of a locker and for the upkeep of the athletic facilities.

The prospect of the success of the Club plan seems extremely bright. There are already many more members than it was supposed would be the case with any new plan immediately after its inauguration. On October 4 (when this was written), the membership roll was 448, and increasing constantly, so that there seems every reason to expect that it will wipe out the dining hall difficulties. But beyond that, and quite as important, it seems likely to increase the relations of practically the whole body of the students and Faculty with the Dormitory and with the individual members of the Club and to lead to development of improvements and new activities under the general guidance of the student-body itself.

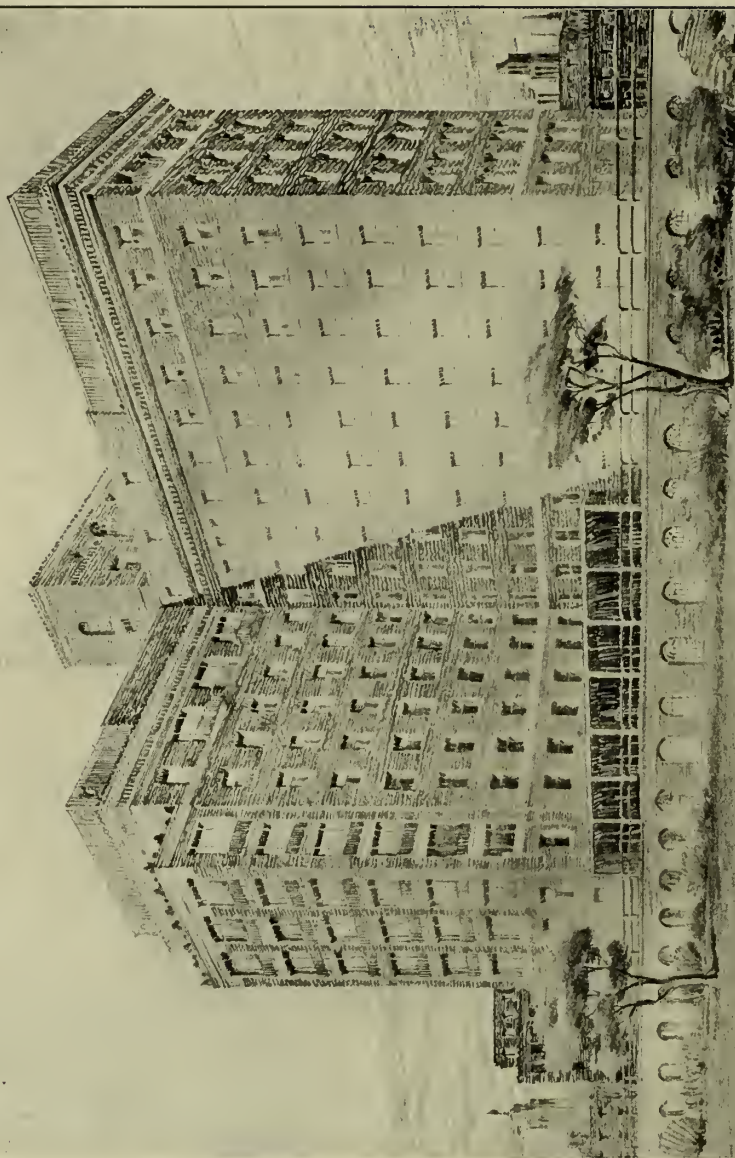
New Unit at the Massachusetts General

BY WILLIAM B. BREED, M.D.

IN February, 1930, the trustees of the Massachusetts General Hospital will open the Baker Memorial to the public. This new hospital unit has been designed for the care of sick people of moderate means, and as such will be an institution unique in hospital experience. There have always been available beds at a moderate cost, even lower perhaps than those in the new building, but nowhere has voluntary curtailment of physicians' fees been attempted in an institution. It soon became apparent, in considering medical care for people in moderate financial circumstances, that no progress could be made without including in calculations the attending

physician's fee. It will be possible in the Baker Memorial for a person to plan on a *maximum* charge from his physician, regardless of the length of his stay. Charges for services amounting to less than the maximum will be determined upon after due consideration of the nature and length of the illness in its relation to the amount and source of the income. This maximum fee has been set at one hundred and fifty dollars (\$150) and all fees *may* be collected by the hospital management. The obstetrical charge is to be somewhat modified in that the maximum fee for *uncomplicated* delivery and hospital care will be one hundred dollars (\$100), leaving

PROPOSED HOSPITAL FOR
PEOPLE OF BOSTON - MASS.
MILLICENT'S GENERAL HOSPITAL
Coolidge, Vreney & Ames Architects



the maximum here as well at one hundred and fifty dollars (\$150), regardless of complications. Only members of the staffs of the Massachusetts General Hospital, the Massachusetts Charitable Eye and Ear Infirmary, and the Obstetrical Staff recently appointed will be eligible to practise in this building.

The building itself will be eleven stories in height; in shape, as seen in the accompanying cut. In the basement, will be housed the main kitchen, diet kitchen, nurses' dining rooms, rest rooms, and clothes rooms. Corridors connect this floor with the basement of the General Hospital. The first floor will include the lobby, executive, and admitting offices, as well as a fully-equipped X-ray department in charge of the roentgenologist of the General staff. On the second floor, will be a clinical laboratory which will be in charge of a clinical laboratory physician. As soon as possible, this department, linked with the General Hospital laboratories, will conduct a school for technicians. Special tests will be made in the main laboratories. The ninth floor will be devoted to obstetrics, while the eleventh floor will contain operating and delivery rooms.

The medical and surgical supplies, as well as food, heat, light, power, and laundry work, will be furnished from the General plant, thus eliminating much duplication of equipment and labor.

Medical, surgical, and special residents will be maintained; also the medical and surgical services in the General Hospital will include a period at the Baker Memorial. This important feature—resident physicians and house officers—has been developed in order to keep the records and service at the same high level as is at present maintained in the parent institution itself.

The employment of special nurses will be discouraged. Many ward maids, nurses' helpers, and floor clerks will be utilized in order to allow the floor nurses furnished by

the Training School to devote all their time to actual bedside nursing.

There will be a special representative of the Social Service Department installed in the new building. She will inaugurate a new departure in applying social service principles to a new class of people.

Three hundred and thirty-three beds will eventually be available. For an indefinite period the second floor will be occupied by Wards C and D of the General Hospital and will operate as part of the Medical and Surgical Services, taking 29 beds. Nine beds will be occupied by resident physicians. During the first months—until other quarters are provided—105 beds will be allotted to nurses. Therefore, when the building opens there will be 189 beds available to patients of moderate means, distributed as follows: 88 beds in single rooms, 24 beds in two-bed wards, 28 beds in four-bed wards, 18 beds in cubicles. In addition to these, there will be for obstetrical patients, 17 beds in single rooms, six beds in two-bed wards, and eight beds in four-bed wards, with nurseries for some 31 cribs.

A private room will cost the patient six dollars and fifty cents (\$6.50) per day. One-bed cubicles can be had for four dollars (\$4) a day. Four-bed rooms are four dollars and fifty cents (\$4.50), and two-bed rooms five dollars and fifty cents (\$5.50) per day. Floor nursing, food, and ordinary drugs are included in each price. There will probably be a flat fee charged for laboratory work, to include clinical pathology, pathology, bacteriology, metabolism studies, etc. X-ray charges will be extra.

Recently an announcement has come from Chicago to the effect that the Rosenwald Fund Committee agrees to underwrite one-half of the deficit in operation during the first three years up to a maximum sum of one hundred and fifty thousand dollars (\$150,000), not to exceed seventy-five thousand dollars (\$75,000) in any one year.

Appointments of the Class of 1929

	HOSPITAL	SERVICE	FROM	To
Adams, H. D.	Massachusetts General	Surgical	Apr. '30	May '32
Adams, John	Boston City	Medical	Oct. '29	Apr. '31
Arnold, M.	Boston City	Medical	July '29	Jan. '31
Bair, H. L.	Wesley Memorial, Chicago	Rotating	Oct. '29	Oct. '31
Barrett, W. G.	Barnes Hospital, St. Louis	Medical	Jan. '30	July '31
Bascom, F. S.	Good Samaritan, Los Angeles	Surgical	Jan. '30	Jan. '31
Bowie, M. A.	Peter Bent Brigham	Medical	June '29	Oct. '30
Bradley, Charles	Pennsylvania Hospital, Philadelphia	Rotating	Oct. '29	Oct. '31
Bright, E. F.	Lakeside Hospital, Cleveland (Palmer Memorial—Path.)	Surgical	Apr. '30 July '29	Apr. '31 Apr. '30
Brown, J. E., Jr.	Boston City	Medical	Oct. '29	Apr. '31
Buddington, W. T.	Boston City	Surgical	Nov. '29	July '31
Bulley, K. G.	Columbia Hospital, Milwaukee	Rotating	July '29	July '31
Burch, H. A.	Henry Ford, Detroit	Rotating	Sept. '29	Sept. '30
Cadden, A. V.				
Cantor, Hyman	Sinai Hospital, Baltimore	Surgical	July '29	July '30
Carniglia, E. F.	Hartford Hospital, Hartford	Rotating	July '29	Dec. '30
Carr, D. M.	Boston City	Surgical	Mar. '30	Nov. '31
Cavanaugh, F. T.	Jersey City Hosp., Jersey City	Rotating	July '29	July '31
Chittick, R. A.	Worcester City, Worcester	Rotating	Sept. '29	Sept. '31
Cochran, Williams	Boston City	Surgical	Mar. '30	Oct. '31
Cohn, G. M.	Newark Beth Israel Hospital	Rotating	Aug. '29	Jan. '31
Colton, E. T., Jr.	Asst. to Dr. Charles Kelley, Cortland, N. Y.		July '29	—
Courtright, L. J.	U. S. Public Health	Rotating	July '29	—
Crawford, H. B.	Mary Hitchcock, Hanover, N. H.	Rotating	July '29	July '30
Dixon, T. W.	University of Chicago	Rotating	July '29	July '30
Dodson, L. C.	Boston City	Surgical	July '29	Mar. '31
Dozier, P. C.	Peter Bent Brigham	Medical	Oct. '29	Feb. '31
Driver, G. L.	Kansas City General	Rotating	July '29	July '30
Durbin, Edgar	Hartford Hospital	Rotating	Jan. '30	July '31
Eckstein, A. W.	Rhode Island Hospital	Rotating	July '29	Apr. '31
Ettleson, L. N.	Philadelphia Jewish	Rotating	June '29	June '31
Evans, J. P.	Royal Victoria, Montreal	Neuropath.	July '29	July '30
	Billings Hospital, Chicago	Surgical	June '30	June '31
Farrell, J. I.	Peter Bent Brigham	Medical	June '29	Nov. '30
Fender, F. A.	Peter Bent Brigham	Surgical	Oct. '29	Jan. '31
Flanders, Jackson	Boston City	Surgical	Nov. '29	Nov. '31
Folsom, H. F.	Massachusetts General	Medical	July '29	May '31
Fothergill, L. D.	Children's Hospital	Pediatrics	Oct. '29	Jan. '31
Frazier, W. R.	Mayo Clinic	Pathology	Sept. '29	Dec. '29
	Roosevelt Hospital	Surgical	Jan. '30	Dec. '31
Gayl, J. C.	St. Joseph's, Philadelphia	Rotating	July '29	July '30
Gillespie, E. H.	Children's Hospital	Surgical	June '29	Apr. '30
Gilman, B. B.	Massachusetts General	Pediatrics	July '29	Jan. '31
Gilman, R. L.	Hartford Hospital	Rotating	July '29	Dec. '30
Goodkind, R. P.	Boston City	Medical	Apr. '30	Oct. '31
Goodwin, R. H.	Boston City	Surgical	Nov. '29	July '31
Graves, S. C.	Massachusetts General	Surgical	July '29	Aug. '31
Greene, H. H.	Barnes Hospital, St. Louis	Medical	July '29	Jan. '31
Gundersen, S. M.	Massachusetts General	Medical	Oct. '29	Oct. '31
Hadler, H. H.	St. Mark's Hosp., N. Y. C.	Rotating	July '29	July '30
Haislip, N. L.	Ohio Valley General, Wheeling	Rotating	July '28	July '29
Harvey, E. A.	Peter Bent Brigham	Medical	Oct. '29	Mar. '30
Hass, G. M.	Peter Bent Brigham	Pathology	Jan. '30	Jan. '33
Hawes, C. H.	Massachusetts General	Surgical	Oct. '29	Sept. '31

Hedberg, H. E.	Carney Hospital	Surg. & Orth.	Jan. '30	Nov. '31
Hendrix, O. C.	United States Navy	Rotating	one year	
Hertz, Saul	Mt. Sinai, Cleveland	Rotating	July '29	July '30
Hill, N. A.	State of Wisconsin General	Rotating	July '29	July '30
Hoyt, W. F.	Massachusetts General	Surgical	Apr. '30	May '32
Humphreys, G. H.	Presbyterian, N. Y. C.	Surgical	Feb. '30	Feb. '32
Hurwitz, David	Boston City	Medical	July '29	Dec. '30
Hyatt, G. T.	Massachusetts General	Surgical	July '29	Aug. '31
Ingle, C. W.	Hartford General	Rotating	July '29	Jan. '31
Isherwood, J. A.	Walter Reed, Washington	Rotating	July '29	July '30
Jacobs, J. L.	Asst. in Bacteriology	H. M. S.		
Jacobson, B. M.	Beth Israel, Boston	Medical	July '29	Mar. '31
Jewett, E. L.	Morristown Memorial (N. J.)	Rotating	Oct. '29	Oct. '30
Jones, B. F.	Strong Memorial, Rochester	Research		
Kelley, S. B.	Massachusetts General	Surgical	Jan. '30	Feb. '32
Kelly, P. B.	Boston City	Medical	Jan. '30	July '31
Kremer, C. E., Jr.	Presbyterian Hospital, Philadelphia	Rotating	July '29	July '31
Kushner, Irving	Bronx Hospital, N. Y. C.	Rotating	June '29	May '31
Labovitz, Joseph	Waltham City			
Leet, W. L.	Providence City, Providence	Contagious	Oct. '29	Jan. '30
	Rhode Island, Providence	Rotating	Jan. '30	Oct. '31
Leonard, D. W.	Newton Hospital	Rotating	July '29	July '30
Loverud, H. I. L.	Harper Hospital, Detroit	Rotating	July '29	July '30
Mabrey, R. E.	Lakeside Hospital, Cleveland	Surgical	Oct. '29	Oct. '30
Maggio, V. S.	St. John's, Long Island City	Rotating	May '29	—
Mahoney, W. deG.	Peter Bent Brigham	Surgical	Oct. '29	Jan. '31
Marks, J. H.	Peter Bent Brigham	Medical	Feb. '30	July '31
Marques, G. S.	Sacred Heart, Allentown	Rotating	July '29	July '30
McDonald, F. C.	Children's Hospital	Pediatrics	July '29	July '30
McGinn, Sylvester	Providence City	Rotating	July '29	Jan. '30
	Rhode Island, Providence	Rotating	Jan. '30	Nov. '31
McKenna, J. B., Jr.	Boston City	Neurological	July '29	July '30
McKendall, B. S.	Albany Hospital	Rotating	July '29	July '30
Miller, D. K.	Boston City	Medical	Jan. '30	June '31
Miller, M. L.	Massachusetts General	Medical	Apr. '30	Feb. '32
Morris, A. E.	Worcester City	Rotating	Aug. '29	Aug. '31
Noble, C. A., Jr.	Massachusetts General	Medical	Jan. '30	Dec. '31
Ortiz, A. M.	(Abroad)			
Owen, E. P.	Good Samaritan, Portland, O.	Rotating	July '29	July '30
Palette, E. C.	Roosevelt, N. Y. C.	Surgical	Jan. '30	Jan. '32
Parnall, Edward	Rochester General	Rotating	July '29	July '30
Patterson, J. K.	Naval Hospital, Brooklyn	Rotating	July '29	July '30
Poindexter, H. A.	Andrews' Memorial Hospital, Tuskegee, Ala		July '29	July '30
Porter, E. F.	Instructor, Bacteriology	H. M. S.	1929-1930	
Prien, E. L.	Lane Hospital, San Francisco, Cal.	Rotating	July '29	July '30
Quintilian, A.	Union Hospital, Fall River	Rotating	July '29	July '30
Rafferty, G. W.	Boston City	Surgical	Mar. '30	Nov. '31
Reardon, J. P.	Boston City	Surgical	July '29	May '31
Rhodes, J. S.	Boston City	Surgical	July '29	Mar. '31
Ricketts, H. T.	University Hospital, Philadelphia	Rotating	July '29	July '31
Riseman, J. E. F.	Beth Israel, Boston	Medical	Nov. '29	July '31
Robinson, C. A.	Boston City	Surgical	July '29	Mar. '31
Rosenberg, A. A.	Lenox Hill, N. Y. C.	Medical	Aug. '29	Aug. '31
Ross, L. I.	St. Luke's, N. Y. C.	Surgical	July '29	July '31
Rydell, W. B.	St. Luke's, Duluth, Minn.	Rotating	July '29	July '30
Sanderson, P. G.	Hartford General	Rotating	Jan. '30	July '31
Sears, Lewis	Hartford General	Rotating	Jan. '30	June '31
Serunian, H. H.	St. Francis, Jersey City	Rotating	July '29	July '30
Sheldon, C. P.	Massachusetts General	Surgical	Oct. '29	Oct. '31

Sherwin, Herbert	Fall River General	Rotating	Aug. '29	Aug. '30
Simon, R. L.	Children's Hospital	Pathology	July '29	Jan. '30
	Children's Hospital	Surgery	Jan. '30	Jan. '31
Skeirik, J. Y.	Fifth Avenue, N. Y. C.	Surgical	Jan. '30	Apr. '31
Smedal, M. I.	Harper Hospital, Detroit	Rotating	July '29	July '30
Snedeker, London	Presbyterian Hospital, N. Y. C.	Medical	Feb. '30	Mar. '32
Snelling, D. B.	New Haven Hospital	Medical	Nov. '29	Nov. '30
Spurgeon, D. L.	Boston City	Surgical	Nov. '29	June '31
Stabler, E. V.	Roosevelt Hospital, N. Y. C.	Surgical	July '29	July '31
Stevenson, T. W., Jr.	Presbyterian, N. Y. C.	Surgical	Oct. '29	Oct. '31
Stone, D. C.	Boston City	Medical	Apr. '30	Oct. '31
Streeter, A. L.	Walter Reed, Washington	Rotating	July '29	July '30
Sweet, L. K.	Children's Hospital	Pathology	Jan. '29	Jan. '30
	Children's Hospital	Medical	Jan. '30	Apr. '31
Talbott, J. H.	Presbyterian, N. Y. C.	Medical	Oct. '29	Oct. '31
Tanzer, R. C.	Strong Memorial, Rochester	Surgical	Sept. '29	Sept. '30
Taylor, M. C.	Free Hospital for Women	Gyn.	Sept. '29	—
Teel, H. M.	Lakeside Hospital, Cleveland	Surgical	Oct. '29	Oct. '30
Thompson, K. W.	Peter Bent Brigham	Surgical	Jan. '30	May '31
Thorp, E. G.	Massachusetts General	Medical	July '29	May '31
Twombly, G. H.	Massachusetts General	Surgical	Jan. '30	Feb. '32
Tyroler, F. N.	Bellevue Hospital, N. Y. C.	Surgical	July '29	July '30
Walker, T. T.	Boston City	Pathology	June '29	June '30
Wall, Conrad	Worcester City	Rotating	Aug. '29	May '31
Wallace, H. D., Jr.	Allegheny General, Pittsburgh	Rotating	July '29	July '30
Watson, J. R.	Geisinger Memorial, Danville, Pa.	Rotating	July '29	July '30
White, J. C.	Hartford General	Rotating	July '29	Jan. '31
Yens, Otto C.	Massachusetts General	Medical	Apr. '30	Feb. '32
West, E. J.	Boston City	Surgical	Oct. '28	June '29
	Rhode Island, Providence	Rotating	July '29	Apr. '31

Alumni Employment Bureau

THE Alumni Employment Bureau, established in 1913 by the H.M.S. Alumni Association, is now functioning in close coöperation with the Student Employment Bureau under the direction of Miss Ruth Symonds at the Medical School. It is hoped that doctors and institutions seeking recent Harvard Medical School graduates and, conversely, young doctors on the lookout for positions, will avail themselves of the valuable service which we can render. The following "case history" illustrates what can be accomplished by the Bureau:

A psychiatrist, associated with a private sanatorium situated at some distance from Boston, telephoned to the Employment Bureau asking for a student or recent graduate to accompany a patient to Honolulu for three months.

The patient was described as a young man, age 20, of prominent family, with unlimited means, who at the time was attending college. A change was necessary, so the plan was to give up college from November until midyears,—February 1.

The Secretary of the Bureau knew of a recent graduate who could fill all the requisites for such a position—stability, intellectual companionship, proper social graces, musical talent, a great sense of humor, beside being in financial need, having worked his way through eight years at Harvard. He was at home in the country in California, marking time until January 1, when his internship began. A telegram was sent to him offering him the position, "sight unseen," and he wired back his acceptance, providing his hospital appointment could be postponed until Feb-

ruary 1. The Secretary communicated with one of his colleagues at the Hospital, who secured someone to "strike" during that month, and obtained permission from the Hospital authorities for this postponement. The man was notified of the decision by telegram, and he started East at once, reporting to the psychiatrist. During all this time the psychiatrist was kept informed by telephone of any action which was taken.

After the doctor and the patient had met, they went to the latter's home where his father turned over the entire letter of credit to him, and all final arrangements were made. They rented a house, with a servant and an automobile, and remained in Honolulu three months. Beside all ex-

penses and a splendid vacation, this young interne began his appointment with \$800.

This illustration is given to show how the plan could be carried out with no personal interview. In other words, neither the psychiatrist nor the patient had ever seen the secretary nor the doctor until the doctor had actually come East, and yet the arrangements were made smoothly and satisfactorily.

Inasmuch as the office of the Alumni Employment Bureau is in the Medical School and as the same secretary does the work with the student employment, it is possible for her to be in close contact with the entire student body during their course and to know intimately their problems, needs, and possibilities.

The Dining Room in Vanderbilt Hall



MORTON PRINCE, M.D., LL.D.

In the death of Dr. Morton Prince, which occurred on August 31, 1929, the medical profession has lost one of its outstanding members, and the community a vigorous exponent of good government. He enjoyed politics, a tradition in the family, as well as medicine, and found time in his extremely busy life to take an active part in civic affairs, and during the year of the World War in the broader field of international relations for which he received recognition from several foreign nations. Valuable as this public service was, he will be remembered in the future for his pioneer work in his chosen subject of neurology and psychopathology. After his return from a period of study abroad in the early eighties, he at once entered actively into medical practice and, following some preliminary work in the nose and throat and general medicine, he turned toward neurology, especially its more functional aspects, and began the writing and investigating which quickly placed him in the front rank of contemporary students of the subject. To Prince is, in very considerable measure, due the recognition in this country of the importance to medicine and to society at large of the psychological approach. He was an ardent advocate of a more liberal attitude on the part of medical schools in their teaching and was entirely fearless in the expression of his convictions. His appointment as Associate Professor of Abnormal and Dynamic Psychology in Harvard College several years ago he regarded as one of his crowning achievements. He considered it an acknowledgment on the part of the University of the importance of psychopathology, on the one hand, as a pre-medical subject, and on the other, as an integral part of psychology as a whole. Prince was a writer on a great variety of subjects, by no means confined to medicine. His interpretation of the former Kaiser's character, published in 1915, was an interesting war document and a shrewd analysis of European conditions. Of his more ambitious books "The Dissociation of a Per-

sonality" takes first place and did more perhaps than any other single piece of work to establish his reputation as a student of the problem of personality. He was in the forefront of progress in his chosen field, original and courageous in the expression of his views—always a leader, never a subservient follower. As a controversialist he was fair and good-tempered, willing to see an opponent's viewpoint while vigorously maintaining his own. In spite of the diversity of his medical interests, he was an ardent yachtsman and horseman. He played and worked with equal ardor. His industry and enthusiasm never flagged, and death came while he was still in full possession of his mental powers. To those who knew him personally he will be remembered as a man of peculiar geniality and charm, a gracious host and a sympathetic friend. Specialist in one sense though he was, he still was able to preserve through his long life a profound interest in everything which makes life worthwhile. He lived, as he worked, intensively. He belonged to many societies and clubs, as one would expect, and to all he gave something of his enthusiasm. His positive contribution, however, was unquestionably his pioneer work in psychopathology at a time when knowledge was slight and general interest less in this difficult and unexplored field. Dr. Prince was born December 21, 1854, was graduated in the Harvard College class of 1875 and from the Harvard Medical School in 1879.

DR. JAMES SAVAGE STONE

Dr. James Savage Stone, former chief of the Surgical Service of the Children's Hospital, Boston, died, September 28, 1929, at his home in Framingham Center, Mass., after a few weeks' illness. He was born at Newton in 1868, the son of Dr. Lincoln Ripley and Harriet (Hodges) Stone, and was graduated from the Newton High School in 1885. He received his A.B. degree from Harvard in 1889, and the M.D. and A.M. degrees from Harvard in 1894. Dr. Stone was visiting surgeon of the

Children's Hospital, consulting surgeon of the Boston Floating Hospital during the last few years it was in service, the Boston Dispensary, the Infants' Hospital, and the Framingham Hospital, and instructor in Surgery at the Harvard Medical School. He was a member of the Massachusetts Medical Society—serving as president in 1925—the American Medical Association, the New England Surgical Society, and the Boston Surgical Society. During the World War he was chief of the surgical service in the Base Hospital at Camp Jackson, S. C. While in the Army he was very critically ill with meningitis. Dr. Stone's work at the Children's Hospital was his greatest interest, but busy as he was, he found time to give unselfishly, and in greater measure than his health justified, of his great ability in the field of medical legislation and the affairs of the Massachusetts Medical Society. The following resolutions, adopted by the staff of the Children's Hospital, express very well not only the character of Dr. Stone, but the love and affection that he inspired in his associates: "The untimely death on Saturday, September 28, 1929, of Dr. James Savage Stone, brought to a close over thirty years of devoted service to the Children's Hospital. Throughout his long period he saw the hospital increase its usefulness to the community, and this growth was in large measure due to his farsightedness and unselfish devotion. But with the growth of the hospital and its ever increasing number of patients, Dr. Stone never lost the extraordinary personal touch that so characterised his relations with the individual child and his parents. His ability to make friends with the sick child of any class or age and his exceptionally keen clinical judgment and wide experience often made it possible for him to arrive at a correct diagnosis when others less gifted would fail. His unflinching good nature and sense of humor, his sympathetic relations toward his associates, whether doctors, nurses, or internes, made him one with whom it was a great privilege to be associated. The confidence he in-

spired made him the one to whom all turned in times of difficulty and from whom they were sure of wise advice, kindly and generously given. It is to be hoped that those of us who have been privileged to work with Dr. Stone may in some degree pass on some of his spirit of kindness, wise teaching, and common sense to those who have not had our unusual opportunity."

NECROLOGY

Walter Le Grand Bond, Somerville, Mass., M.D. '01. Aged 52; died May 14, 1929.

Thomas Bernard Carpenter, Buffalo, M.D. '90. Associate Professor of Genito-urinary Surgery, University of Buffalo School of Medicine; formerly city bacteriologist; on the staffs of the Buffalo General Hospital and the Buffalo City Hospital; aged 60; died May 27, 1929, of tuberculosis.

Herbert Codman Clapp, Brookline, Mass., M.D. '70. Instructor in auscultation and percussion, 1877-1885, professor of diseases of the chest, 1885-1915, and since 1915 *emeritus* professor, Boston University School of Medicine; on the staff of the Massachusetts Homeopathic Hospital, Boston, and formerly on the staff of the Massachusetts State Sanatorium for Incipient Consumptives, Rutland; author of "Auscultation and Percussion," and other books; aged 83; died April 30, 1929, at Boston, of nephritis, following an operation on the prostate.

Samuel Crowell, Boston, M.D. '85. Member of the Massachusetts Medical Society; on the staff of the Massachusetts Women's Hospital; aged 71; died July 17, 1929, of bronchopneumonia.

Mott Alvah Cummings, Winchester, Mass., M.D. '87. Aged 67; died June 23, 1929, of arteriosclerosis.

Elbridge Gerry Cutler, Boston, M.D. '72. Formerly instructor in theory and practice of physic at the School; on the staff of the Massachusetts General Hospital; aged 82; died June 23, 1929, at his summer home in York Harbor, Me.

Sam Starrett Dearborn, Nashua, N. H., M.D. '98. Past president of the Hillsboro County, N. H., Medical Society; member of the New England Surgical Society; formerly on the staffs of the Nashua Memorial Hospital and St. Joseph's Hospital; aged 57; died May 3, 1929, of tuberculosis.

Charles Stein Dunn, Haverhill, Mass., M.D. '83. Member of the Massachusetts Medical Society; aged 69; died January 6, 1929, of chronic

myocarditis, nephritis, and cerebral hemorrhage.

Henry Strong Durand, Rochester, N. Y., M.D. '86. Aged 68; died May 8, 1929, at the American Hospital, Paris, France, of heart disease.

Rufus Anderson Kingman, Wallingford, Vt., M.D. '82. Formerly on the staff of the Boston City Hospital and St. Elizabeth's Hospital, Boston; aged 70; died March 28, 1929, of angina pectoris.

Henry Foster Lewis, Wooster, Ohio, M.D. '88. Professor of physical diagnosis, College of Physicians and Surgeons, Chicago, 1891-1903; associate, instructor, and assistant professor of obstetrics and gynecology, Rush Medical College, Chicago, 1899-1907; professor and head of the department of obstetrics and gynecology, Loyola University School of Medicine, 1910-1918, and formerly professor of obstetrics at the University of Illinois College of Medicine; served during the World War; in 1895 curator of the museum and for many years on the staff of the Cook County Hospital; aged 65; died August 5, 1929.

Matthews Patrick Mahoney, Lowell, Mass., M.D. '10. Member of the Massachusetts Medical Society; aged 45; was found dead, July 3, of a bullet wound, presumably self-inflicted.

Henry Lee Morse, M.D. '78, retired otologist of Boston; died at his home in Medfield, after a

long illness, September 7, 1929; aged 76. He was born in Boston, November 18, 1852, and received the degree of A.B. from Harvard College in 1874. In his later years Dr. Morse was consulting aurist to the Massachusetts General and Children's Hospital, and had previously been aural surgeon to the Massachusetts Charitable Eye and Ear Infirmary. In 1924, Dr. Morse, although in poor health, attended the fiftieth anniversary of his College class at Cambridge.

Frederick Stedman Snow, Boston, M.D. '99. Aged 56; died suddenly, July 2, 1929, of heart disease.

Mahidol Songkla, Prince of Siam, M.D. '28. He was a special student in Harvard College during the academic year 1916-17; then he spent two years in the Medical School, and returned in 1926 for an additional two years, at the end of which he received his medical degree. He was greatly interested in medical and educational work among his own people and ambitious to introduce modern medical theories and practice in Siam; at the time of his death he was acting as an interne in the American Mission Hospital at Chiangmai. He was the second brother of the King of Siam and heir presumptive to the throne. He was married, and was 37 years old. He died at Bangkok, Siam, September 25, 1929.

Appointments to the Teaching Staff

THE following new appointments, extending for one year from September 1, 1929, have been made to the teaching staff of the School:

Bacteriology and Immunology.

John Franklin Enders, A.M., Assistant.

John Lesh Jacobs, S.B., Assistant.

Eliot Furness Porter, S.B., Assistant.

Biological Chemistry.

George Herbert Hitchings, S.M., Teaching Fellow.

Physical Chemistry.

Harold Alexander Abramson, M.D., Research Fellow.

Medicine.

Laurence Brewster Ellis, M.D., Assistant.

Clark Wright Heath, M.D., Assistant.

Frank William Marlow, Jr., M.D., Assistant.

Stacy Raymond Mettier, M.D., Assistant.

Nathan Sidel, M.D., Assistant.

William Borden Stevens, M.D., Assistant.

Wheeler Dwight Sutliff, M.D., Assistant.

Louis Joseph Ullian, M.D., Assistant.

Fuller Albright, M.D., Henry Pickering Walcott Fellow in Clinical Medicine.

Marshall Nairne Fulton, M.D., Teaching Fellow.

Elbert Lapsley Persons, M.D., Teaching Fellow.

Francis Dowdle Pierce, M.D., Teaching Fellow.

Richard Townsend Beebe, M.D., Research Fellow.

Douglas Richard Drury, M.D., Research Fellow.

Jacob Lerman, M.D., Research Fellow.

George Eric Lewis, M.D., Research Fellow.

Arthur Ashley Marlow, M.D., Research Fellow.

Ovid Otto Meyer, M.D., Research Fellow.

William Thomas Satler, M.D., Research Fellow.

Neuropathology.

Fred Gibbs, A.B., Assistant

Hiram Houston Merriitt, Jr., M.D., Assistant.

Lawrence Raymond Morrison, M.D., Assistant.

Orthopaedic Surgery.

Frederic Carroll Bost, M.D., Teaching Fellow.*

Otology.

Leon Edward White, M.D., Assistant.

Pathology.

Junius Mott Rawlings, M.D., Instructor.

George Kenneth Mallory, M.D., Assistant.
William Hall Lewis, Jr., M.D., Assistant.

Pediatrics.

Henry Ezra Gallup, M.D., Assistant.
Edward Scott Goodwin, M.D., Assistant.
Harold Dale Pyle, M.D., Assistant.
Ching-lang Kao, M.D., Research Fellow.
Alan Simpson Ross, M.D., Research Fellow.

Pharmacology.

Frederick Kellogg, A.M., Teaching Fellow.

Physiology.

Chester William Hampel, A.B., Teaching Fellow.
Wesley Theodore Pommerenke, Ph.D., Teaching Fellow.

Surgery.

Ernest Merrill Daland, M.D., Instructor.
Horatio Rogers, M.D., Assistant.
Henry William Hudson, Jr., Assistant.
Augustus Thorndike, Jr., M.D., Assistant.

Tropical Medicine.

Clark Wright Heath, M.D., Assistant.

*From January 1 to September 1, 1930.

HONOR FOR DR. TRUESDALE

It should be of interest to all alumni of the Harvard Medical School to know that one of our ex-presidents, and one of the most earnest workers in the interests of the Medical Alumni Association, Dr. Philemon E. Truesdale of Fall River, Mass., was awarded the gold medal for his exhibit as to the mechanism, origin, and management of hernia of the diaphragm, at the meeting of the American Medical Association, held in Portland, Ore., last July.

The Committee which made the award contained men representing various specialties: Dr. Charles R. Bardeen, anatomist, and Dean of the University of Wisconsin Medical School, chairman; Dr. C. Guy Lane, representing the Section of Dermatology; Dr. William Ophuls, pathologist and Dean and Professor of Pathology at Stanford University School of Medicine; Dr. O. H. Wangenstein of Minneapolis, Assistant Professor of Surgery at the University of Minnesota; Dr. William Walter Wasson of Denver, radiologist; and Dr. Gerald B. Webb of Colorado Springs,

representing the Section of Internal Medicine.

The winner of the Class II gold medal for the previous year was Dr. Walter M. Simpson for an exhibit on the subject of Tularemia.

Dr. Truesdale's exhibit consisted of a large booth, with excellent illustrations and diagrams of the various types of hernia of the diaphragm together with drawings of the mechanism producing this condition. One of the most valuable and interesting portions of the exhibit was a moving picture demonstration of the experimental production of diaphragmatic hernia in the dog, similar to the occurrence of hernia in children after automobile accidents, the common trauma producing this type of hernia in humans.

Dr. Truesdale is to be congratulated upon the excellence of this exhibit. It is a real honor of which he should be justly proud inasmuch as this award is made in a scientific exhibit made up of contributions from all parts of the United States and from the various medical schools and clinics from all parts of the country.

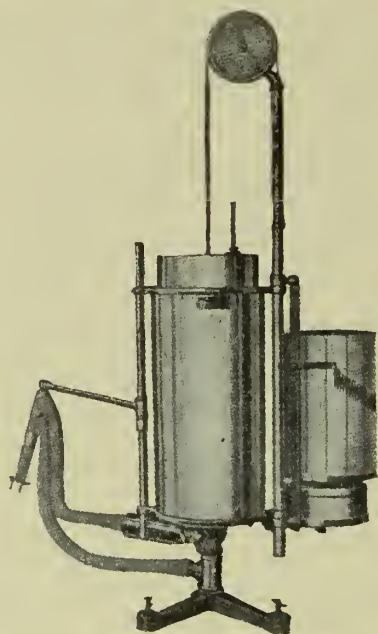
It is an interesting commentary that all of the experimental dog work was conducted in the Harvard Medical School and that this necessitated long, repeated trips from Fall River, Dr. Truesdale's home, in order to complete the work of these experiments.

It well illustrates that there are no obstacles too great to be overcome where one has sufficient scientific curiosity.

FRANK H. LAHEY, M.D. '04.

THE BULLETIN

The BULLETIN is attempting to provide material which will be of interest to all graduates of the Harvard Medical School. The editors will endeavor to furnish information about the School itself, what it is doing and how it is developing; and they would like to receive from the alumni items of news about themselves and other graduates. In addition, special articles for publication in these columns will be welcomed at the editorial office.



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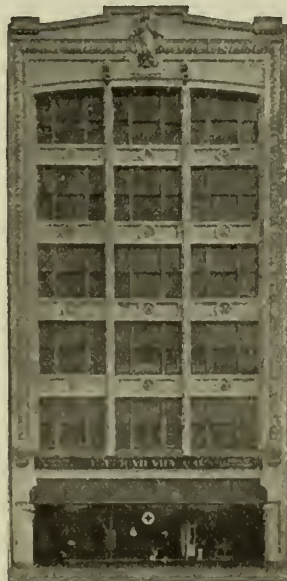
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